

Mailing
Documents to
the Central
Processing Unit
("CPU") Or the
MassHealth
Enrollment
Centers
("MEC")

The following documents must be mailed to CPU, OR the appropriate MEC if ANY applicant is age 65 or older and not a parent/caretaker relative of a child under 19, within three business days of submitting an application (clicking "Submit") on the Virtual Gateway.

- Electronic Application Signature Page (2-page form, or one page from the VG Bedside Tool, if applicable)
- Permission to Share Information (PSI) form
- Absent Parent Questions and Assignment of Rights (if applicable)
- Eligibility Representative Designation Form (if applicable)
- DDU verification, if applicable

Please mail them to--

CENTRAL PROCESSING UNIT PO BOX 290794 CHARLESTOWN, MA 02129-0214 ATTN: ELECTRONIC PROCESS

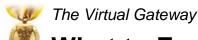
> REVERE MEC 300 OCEAN AVENUE SUITE 4000 REVERE MA 02151

SPRINGFIELD MEC 333 BRIDGE STREET SPRINGFIELD MA 01103

TAUNTON MEC 21 SPRING STREET, SUITE 4 TAUNTON MA 02780

TEWKSBURY MEC 367 EAST STREET TEWKSBURY MA 01876 Please send "Attn.: CIT Team"

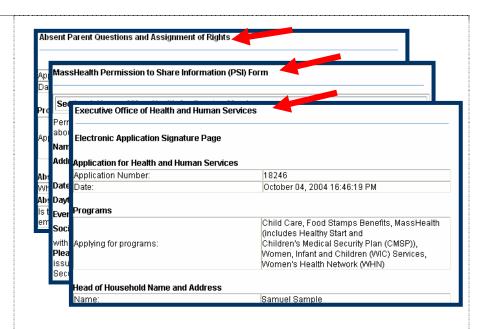
Before mailing them, follow these steps:



Step 1:

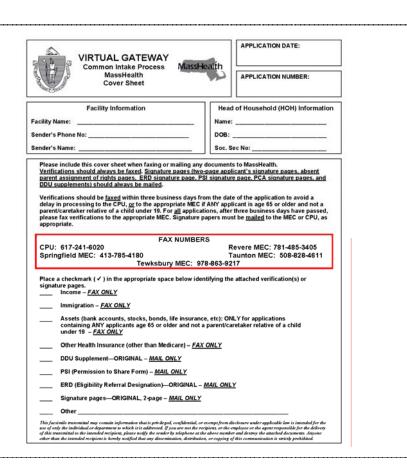
Obtain Signatures on appropriate forms:

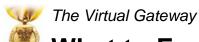
- Electronic Application Signature Page (2-page form, or one page from the VG Bedside Tool if applicable)
- Permission to Share form
- Absent Parent Questions and Assignment of Rights (if applicable)
- Eligibility Representative Designation Form (if applicable)
- DDU verification (if applicable)



Step 2:

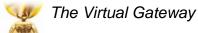
Complete the Virtual Gateway Cover Sheet.





Step 3: Label all forms/ Electronic Application Signature Page documents mailed or r Health and Human Services faxed to the CPU (or Application Number 18246 MEC) with the Virtual Gateway Application No., Programs Child 0 Head of Household name (include **Application No. 18246** Applying for programs and Social Security (Example) number. ad of Household Name and Address Step 4: Mail within 3 business days: **CENTRAL PROCESSING UNIT** PO BOX 290794 CHARLESTOWN, MA 02129-0214 **ATT: ELECTRONIC PROCESS REVERE MEC 300 OCEAN AVENUE SUITE 4000 REVERE MA 02151** Please **SPRINGFIELD MEC** send 333 BRIDGE STREET "Attn.: **SPRINGFIELD MA 01103** CIT **TAUNTON MEC** Team" 21 SPRING STREET, Suite 4 **TAUNTON MA 02780 TEWKSBURY MEC 367 EAST STREET**

TEWKSBURY MA 01876



Faxing Verifications to the Central Processing Unit Or the MassHealth Enrollment Centers

The following documents must be FAXED to the CPU, OR to the appropriate MEC if any applicant is age 65 or older and not a parent/caretaker or relative of a child < 19, within three business days of submitting an application on the Virtual Gateway.

- Earned Income
 - o 2 pay stubs or,
 - if self-employed the most recent tax return or,
 - as a last resort, a signed, written declaration when pay stubs or tax returns are not available can be used and must include gross amount and number of hours worked
- Immigration Fax (Green card, etc.)
- Health Insurance Cards Fax
- Unearned income such as alimony, dividends, interest, rental income
- Assets (bank accounts, stocks, bonds, life insurance, etc):
 ONLY for applications containing ANY applicants age 65 or older and not a parent/caretaker relative of a child under 19

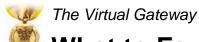
Please fax them to

Charlestown CPU 617-241-6020
Revere MEC 781-485-3405
Springfield MEC 413-785-4180
Taunton MEC 508- 828-4737
Tewksbury MEC 978-863-9217

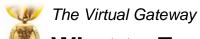
The following documents are not required for MassHealth:

- Driver's license
- Utility bills
- Homeless verifications
- Proof of no income

Before faxing verifications, follow these steps.



Step 1: Collect and label all Electronic Application Signature Page verifications. Label all forms/documents Application Number: 004 16:46:19 PM mailed or faxed to the CPU Programs (or MEC) with the Virtual Child Care, Fo Application No. 18246 Gateway Application No., (includes Hea Children's Me Applying for programs Head of Household name (Example) Women Infant Women's Hea and Social Security number. Head of Household Name and Address Samuel Sample Step 2: APPLICATION DATE: VIRTUAL GATEWAY Complete a Virtual APPLICATION NUMBER: Cover Sheet Gateway Cover Sheet. Facility Information Please include this cover sheet when faxing or mailing any documents to MassHealth. <u>Verifications should always be faxed. Sionature pages (two-page applicant's signature pages, absent</u> pagent assignment of rights pages. <u>ERD signature page</u>, <u>PSI signature page</u>, <u>PCA signature pages, an</u> <u>DDU supplements) should always be mailed.</u> Verifications should be <u>faxed</u> within three business days from the date of the application to avoid a delay in processing to the CPU, or to the appropriate MEC if ANY applicant is age 65 or older and not a parent/caretaker relative of a child under 19. For <u>all</u> applications, after three business days have passed, please fax verifications to the appropriate MEC. Signature papers must be <u>mailed</u> to the MEC or CPU, as appropriate. FAX NUMBERS CPU: 617-241-6020 Springfield MEC: 413-785-4180 Tewksbury MEC: 978-863-9217 CPU: 617-241-6020 Revere MEC: 781-485-3405 Taunton MEC: 508-828-4611 Place a checkmark (\checkmark) in the appropriate space below identifying the attached verification(s) or signature pages. Income - FAX ONLY ___ Immigration – FAX ONLY Assets (bank accounts, stocks, bonds, life insurance, etc): ONLY for applications containing ANY applicants age 65 or older and not a parent/caretaker relative of a child under 19 - <u>FAX ONLY</u> Other Health Insurance (other than Medicare) – FAX ONLY DDU Supplement—ORIGINAL - MAIL ONLY PSI (Permission to Share Form) – <u>MAIL ONLY</u> ERD (Eligibility Referral Designation)—ORIGINAL - MAIL ONLY Signature pages—ORIGINAL, 2-page – MAIL ONLY



Step 3:	Fax with VG Cover Sheet to	
Fax verifications to the CPU, or the appropriate MEC if any applicant is age 65 or older and not a parent/caretaker or relative of a child < 19.	Charlestown CPU Revere MEC Springfield MEC Taunton MEC Tewksbury MEC	617-241-6020 781-485-3405 413-785-4180 508-828-4811 978-863-9217
	Note: The timely faxing of verifications (income, and or assets and immigration) will ensure more efficient processing of any MassHealth application (electronic VG or paper MBR).	
After 3 Business Days	After 3 business days, mail signature pages and fax verifications to the local MEC. Please be sure to label all documents and use the VG Cover Sheet.	